

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SEARCH NO. 107019492 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		/				
2			/			
3			/			
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TOTAL IND.			3			
TOTAL DEP.		17				
TOTAL CLAIMS	20					

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